

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		43	4/12/01
FORMALITY REVIEW	SH	1085	4/12/01
RESPONSE FORMALITY REVIEW	ZM	927	09/19/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	
1 ✓	4/2/01
2 ✓	4/2/01
3 ✓	4/2/01
4 ✓	4/2/01
5 ✓	4/2/01
6 0	4/2/01
7 0	4/2/01
8 0	4/2/01
9 0	4/2/01
10 ✓	4/2/01
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here